

HOPWA Semi-Annual Performance Report

<u>Reporting Period</u>	<u>Reporting Deadline</u>
January 1 – June 30	July 31 st
July 1 – December 31	January 31 st

This report (one original and one copy) must be submitted to IHFA by January 31st and July 31st each year.

Instructions

Cover Sheet

Report Type: Mark whether the report being submitted is an interim report or final report.

Project Sponsor: Enter the name of the project sponsor as shown in the IHFA HOPWA grant agreement.

Grant #: Enter the grant number as shown in the IHFA HOPWA grant agreement.

County: List the county in which the project sponsor is located.

Activity Description: Enter the activity type(s) for which grant funds were awarded (e.g. rental assistance, supportive services, etc.).

Grant Amount: Enter the amount of grant funds awarded as shown in the IHFA HOPWA grant agreement.

Grant Execution Date: Enter the date the IHFA HOPWA grant agreement was signed by the IHFA Executive Director.

Current Grant Expiration Date: This date is located on page two of your IHFA HOPWA grant agreement or on the most recent grant extension request approved by IHFA.

Report Prepared By: Enter the name, organization, address, phone number, and fax number of the person preparing this report.

Project Sponsor Certification: The performance report must contain the **original** signature of the project sponsor's chief executive officer (chief elected official or authorized nonprofit signatory).

Table 1 – Grant Summary

Project Sponsor: Enter the name of the Project Sponsor as shown in the IHFA HOPWA grant agreement.

Grant #: Enter the grant number as shown in the IHFA HOPWA grant agreement.

Question 1: This is your opportunity to inform IHFA of the grant progress that has taken place during the current reporting period.

Question 2: Note any problems that have been encountered or any problems that can be foreseen (e.g. lack of interest in program, lack of available landlords, rental properties, etc.)

Table 2 - Cumulative Financial Status Report

Project Sponsor: Enter the name of the Project Sponsor as shown in the IHFA HOPWA grant agreement.

Grant #: Enter the grant number as shown in the IHFA HOPWA grant agreement.

Project Sponsor Funding Summary (LIST CURRENT YEAR HOPWA FUNDS ONLY)

- A. Budget Line Item Name:** Enter the title for each budget line item for which grant funds have been awarded as they appear in the IHFA HOPWA grant agreement or the most current budget modification approved by IHFA.
- B. Latest Approved Budget Line Item Amount:** Enter the grant budget amount for each of the budget line items as they appear in the IHFA HOPWA grant agreement or the most current grant modification approved by IHFA.
- C. Total Commitment (Amount Under Contract or Allocated to a Specific Purpose):** List the cumulative amount of grant funds for each line item that have been placed under contract or allocated to a specific purpose or client. This includes rent allocated for clients under long-term rental assistance, any ongoing supportive services contracts or other contracts. This does NOT include short-term payments.
- D. Disbursement of HOPWA Funds:** Enter the total cumulative cash disbursements of HOPWA funds for each budget line item. This is where you would put all of the funds that you have spent to date on each budget line item.
- E. Unpaid Obligations:** Enter the total amount of unpaid invoices and/or unpaid balances in contracts awarded for each budget line item. Column E equals the difference between Column C and D.
- F. Uncommitted HOPWA Funds:** Enter the amount of unencumbered funds in the grant budget for each budget line item. This is the amount of HOPWA funds that are remaining to be contracted from each budget line item. Column F equals the difference between Column B and C.

Summary of HOPWA Drawdown Requests

Project Sponsor: Enter the name of the Project Sponsor as shown in the IHFA HOPWA grant agreement.

Grant #: Enter the grant number as shown in the IHFA HOPWA grant agreement.

This portion of the table accounts for all HOPWA funds that have been received by the Project Sponsor from IHFA.

- In the column “date HOPWA funds received,” enter the date that the Project Sponsor received the HOPWA funds from IHFA.
- In the column “amount of HOPWA drawdown,” enter the amount of HOPWA funds received from IHFA.

- In the column, “cumulative HOPWA funds received,” include a cumulative balance of HOPWA funds received.

Table 3 - Contract/Subcontract Activity

Project Sponsor: Enter the name of the Project Sponsor as shown in the IHFA HOPWA grant agreement.

Grant #: Enter the grant number as shown in the IHFA HOPWA grant agreement.

In the “current reporting period” column, report only the activity that has taken place in the current reporting period.

In the “cumulative” column, report all activity that has taken place during the grant timeframe.

1. List the dollar amount of contracts awarded from all funding sources.
2. List the dollar amount of contracts awarded using HOPWA funds (for the intent of this report the rental agreements that clients enter into for long-term rental assistance are considered “contracts”).
3. List the number of contracts awarded from all funding sources.
4. List the number of contracts awarded using HOPWA funds.

For the Professional Service Contracts or Subcontracts section, provide only information on non-construction contracts awarded during current reporting period (e.g. Consultant, Staff member, Subrecipient, Grant Administrator).

For the Construction Contracts section, provide only information on construction contracts awarded during current reporting period.

Date of Contract Award: Enter the date the contract was executed.

Total Contract/Subcontract: List the total amount of the contract or subcontract from all funding sources. Round to the nearest whole dollar.

HOPWA portion of the contract: List the amount of the contract or subcontract that was awarded using HOPWA funds. Round to the nearest dollar.

Type of Trade Code: Enter the numeric code listed on the top right section of the form that best indicates the contractor/subcontractor’s type of trade. If the business is a subcontractor, only the subcontractor’s code should be listed.

Racial/Ethnic Code: Enter the numeric code listed on the top right section of the form that best indicates the racial or ethnic characteristic(s) of the owner(s) and controller(s) of 51% of the business. When 51% or more is not owned or controlled by a single racial ethnic category, enter the code that seems most appropriate. If the business listed is a subcontractor, only the racial/ethnic code of the subcontractor should be listed.

Federal Employer Identification Number: Enter the Federal Employer Identification Number (in some cases this will be an individual’s Social Security number) assigned by the U.S. Social Security Administration for the prime contractor, subcontractor, and/or landlord. All entities receiving HOPWA funds are required to provide a Federal ID number or Social Security number.

Contractor/Subcontractor Name and Address: List the name and full business address of **each** contractor, subcontractor, or landlord receiving contract/subcontract work on this grant, regardless of whether or not they are minority contractors or have minority subcontracts.

Female Y/N: If the primary owner(s)/controller(s) of 51% of the business is female, mark “Y.” If the primary owner(s)/controller(s) of 51% of the business is male, mark “N.”

Local Business Y/N: If the business is located within the project county or substantially owned by a county resident, mark “Y.” If not, mark “N.”

Table 4 - Applicants & Beneficiaries Summary

Project Sponsor: Enter the name of the Project Sponsor as shown in the IHFA HOPWA grant agreement.

Grant #: Enter the grant number as shown in the IHFA HOPWA grant agreement.

At the top of the form, indicate with an “X” the appropriate grant activity. If a project involves more than one activity, submit a separate sheet for each activity as well as a total sheet. The total sheet must reflect the number of persons for the entire grant, non double counted [if the same person is involved in more than one housing activity (e.g. short-term assistance and supportive services), only count the person once on the total sheet].

Applicants During Current Reporting Period: Report information on **all** persons applying for the program during the current reporting period.

Cumulative Applicants: Report information on all persons that have completed an application for the program from the beginning of the grant period.

Beneficiaries During Current Reporting Period: Report information on all persons benefiting from the program during the current reporting period. To be a project beneficiary, the housing activity must be complete for that person.

Cumulative Beneficiaries: Report information on all persons benefiting from the program from the beginning of the grant period.

Line 1: List the total number of households (this is the only place on this form where you will report household information).

Line 2: List the number and percentage of white persons (persons having origins in any of the original people of Europe, North Africa, or the Middle East, but not Hispanic).

Line 3: List the number and percentage of African-American persons (persons having origins in any of the black racial groups of Africa, but not of Hispanic origin).

Line 4: List the number and percentage of Hispanic persons (persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture origin, regardless of race).

Line 5: List the number and percentage of Asian persons (persons having origins in any of the original people of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands).

Line 6: List the number and percentage of Native Americans (persons having origins in any of the original peoples of North America and who maintain cultural identification through tribal affiliation or community recognition).

Line 7: List the total number of persons.

Line 8: List the number and percentage of low and moderate income households. Low and moderate income households have incomes less than 80% of area median income (adjusted for household size) as established by HUD.

Line 9: List the number and percentage of disabled persons (persons with a physical or mental impairment). Each client receiving HOPWA assistance is considered disabled.

Line 10: List the number and percentage of elderly persons (persons aged 62 and over).

Line 11: List the number and percentage of persons living in Female Headed Households.